



MVT 41-5 6/04

TYPE OR
PRINT ONLY

ALABAMA DEPARTMENT OF REVENUE
MOTOR VEHICLE DIVISION
TITLE SECTION

P.O. BOX 327640 • Montgomery, AL 36132-7640 • (334) 242-9000

Affidavit of Acquisition and Disposition of a
Non-Total Loss Vehicle by Insurance Company

TYPE OR
PRINT ONLY

**This Affidavit Must Be Submitted As A Supporting Document When Applying For A Certificate Of Title
For A Non-Total Loss Vehicle Acquired By An Insurance Company In Settlement Of An Insurance Claim.**

**THIS FORM MAY BE DUPLICATED OR ADDITIONAL COPIES MAY BE OBTAINED FROM THE DEPARTMENT WEB SITE AT
www.ador.state.al.us/motorvehicle/mvforms/mvt41_5.pdf**

NAME (TITLE OWNER)

ADDRESS			CITY		STATE	ZIP
VEHICLE IDENTIFICATION NUMBER		TITLE NUMBER AND STATE		TAG NUMBER AND STATE		
YEAR	MAKE	MODEL	BODY TYPE	COLOR	ODOMETER READING	
DATE OF LOSS			CLAIM NUMBER			

INSURANCE COMPANY		
NAME OF INSURANCE COMPANY		
ADDRESS		
CITY	STATE	ZIP

ADJUSTING COMPANY (If Applicable)		
NAME OF COMPANY		
ADDRESS		
CITY	STATE	ZIP

This is to certify that the insurance company listed above has acquired ownership of the vehicle described above due to an insurance settlement with the titled owner. This said vehicle was sold or re-assigned to:

NAME OF PURCHASER		DATE OF SALE	
ADDRESS	CITY	STATE	ZIP
LIENHOLDER (IF ANY)			
ADDRESS	CITY	STATE	ZIP

Sworn to and subscribed before me

Signed by:

this _____ day of _____, _____ YEAR

AUTHORIZED REPRESENTATIVE OF INSURANCE COMPANY

SIGNATURE OF NOTARY

My commission expires _____.